

ector's Signature:

Employee signatures on this time sheet certify the employee has performed the work associated with the account(s) listed.

Time Log/Program / Area: 2048-- Boston Drug Lab

Week Ending: January 15, 2011

Employee Name:		Sunday 01/09/11	Monday 01/10/11	Tuesday 01/11/11	Wednesday 01/12/11	Thursday 01/13/11	Friday 01/14/11	Saturday 01/15/11
bett,Kate 61000 Employee Signature	Day: In - Out		7:40 3:10	7:30 3:30		7:25 2:55	7:50 2:50	
	Lunch: Out - In		12:00 12:30	12:00 12:30		12:00 12:30	12:00 12:30	
	Outside Duty: From - To							
			0.5 hr Vacation		SND		0.5 hr Vacation	1 hr Vacation
jardins, Stacey 0-9745 Employee Signature	Day: In - Out		8:25 4:25	7:10 5:10		7:15 4:45	7:50	
	Lunch: Out - In		12:00 12:30	12:00 12:30		12:00 12:30		
	Outside Duty: From - To							9:45
			2.0 hr OT	SND		1.5 hr OT	middlesey Sup.	
okhan, Annie 61000 Employee Signature	Day: In - Out		5:45 4:00	6:45 4:15	6:45	6:45 4:15	6:45 4:00	
	Lunch: Out - In		12:00 12:30	12:00 12:30		12:00 12:30		
	Outside Duty: From - To							9:45 2:00
			1.25 hr OT	1.5 hr OT	SND	1.5 OT	1.25 OT middlesey Sup.	
isca,Daniela 61000 Employee Signature	Day: In - Out		6:45 5:45	6:45 4:45	6:45	6:45 2:45		
	Lunch: Out - In		1:00 1:30	1:00 1:30		1:15 1:45		
	Outside Duty: From - To							
			3.0 hr OT	2.0 hr OT	SND		middlesey SND	

ector's Signature:

*CBS*

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Week Ending: January 15, 2011

Employee Name:		Sunday 01/09/11	Monday 01/10/11	Tuesday 01/11/11	Wednesday 01/12/11	Thursday 01/13/11	Friday 01/14/11	Saturday 01/15/11
zter, Lisa 61000 <i>Lisa Manger</i> Employee Signature	Day: In - Out		6:45	3:30	6:45 2:45		6:50 2:50	6:45 2:45
	Lunch: Out - In		12:00	12:30 12:00	12:30		12:00 12:30	12:00 12:30
	Outside Duty: From - To		BMC 12:50	3:30				
	Document exceptions or comments, indicate type and amount.		0:75 Comp earned			SNO		
Mer, Michael 61000 <i>Mike Mer</i> Employee Signature	Day: In - Out		6:25	4:25	8:00 6:00		8:55 6:25	8:10 5:30 9:30 5:00
	Lunch: Out - In		11:45	2:10	14:0	2:10	2:15 3:15	10:40 12:35 2:20 2:50
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and amount.			OT 2:0	SNO	OT 1:5		OT 7:0
Dina, Nicole 61000 <i>Dina</i> Employee Signature	Day: In - Out							
	Lunch: Out - In							
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and amount.		MUM	MUM	MUM	MUM	MUM	
Iren, Elisabeth 61000 <i>Elisabeth</i> Employee Signature	Day: In - Out		7:30	4:30	7:30 2:30		7:40 2:40	7:35 2:35
	Lunch: Out - In		11:30	12:00	11:30 12:00		11:30 12:00	11:30 12:00
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and amount.		VAC 0:5		SNO			

ector's Signature:

*CBS*

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Time Log/Program / Area: 2048-- Boston Drug Lab

Week Ending: January 15, 2011

Employee Name:		Sunday 01/09/11	Monday 01/10/11	Tuesday 01/11/11	Wednesday 01/12/11	Thursday 01/13/11	Friday 01/14/11	Saturday 01/15/11
lips, Gloria 61000	Employee Signature <i>DLS</i>	Day: In - Out						
	Lunch: Out - In							
	Outside Duty: From - To							
Document exceptions or comments, indicate type and amount.								
o, Peter 61000	Employee Signature <i>Peter</i>	Day: In - Out	645 515	645 645		645 545	655 608	645 545
	Lunch: Out - In	12 1230	12 1230			12 1230	12 1230	12 1230
	Outside Duty: From - To							
Document exceptions or comments, indicate type and amount.								
iczkowski, Daniel 61000	Employee Signature <i>D. Cz</i>	Day: In - Out	645 245	645 245		645 245	645 245	
	Lunch: Out - In	1200 1230	1200 1230			1200 1230	1200 1230	
	Outside Duty: From - To			Shattuck 840 1000				
Document exceptions or comments, indicate type and amount.								
ague, Shirley 61000	Employee Signature <i>Shirley</i>	Day: In - Out	915 515	915 515 915		915 575	915 515	
	Lunch: Out - In	100 130	100 130			100 130	100 130	
	Outside Duty: From - To							
Document exceptions or comments, indicate type and amount.								

irector's Signature:

*CRB*

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Time Log/Program / Area: 2048-- Boston Drug Lab

Week Ending: January 15, 2011

Employee Name:		Sunday 01/09/11	Monday 01/10/11	Tuesday 01/11/11	Wednesday 01/12/11	Thursday 01/13/11	Friday 01/14/11	Saturday 01/15/11
Zan, Zhi 161000	<i>Zhi</i>	Day: In - Out		6:45 7:45	6:45 7:45		6:45 8:45	
		Lunch: Out - In		12:00 12:30	12:00 12:30		12:00 12:30	
		Outside Duty: From - To						
Employee Signature								
Document exceptions or comments, indicate type and count.						SNO ✓		
Zan, Mai 161000	<i>Mai</i>	Day: In - Out		8:30 2:30			9 3	
		Lunch: Out - In						
		Outside Duty: From - To						
Employee Signature								
Document exceptions or comments, indicate type and count.						SNO ✓ 0.75 hr VAC!		
Connelly, Janice 61000	<i>Janice Connelly</i>	Day: In - Out		6-4- 8:05 4:05			8:10 4:10 8:15 4:15	
		Lunch: Out - In		1- 13:0 13:0 2-			1- 13:0 1- 13:0	
		Outside Duty: From - To						
Employee Signature								
Document exceptions or comments, indicate type and count.						SNO ✓		
Folk, OIG_PRR_002775		Day: In - Out						
		Lunch: Out - In						
		Outside Duty: From - To						
Employee Signature								
Document exceptions or comments, indicate type and count.								

Folk, OIG\_PRR\_002775

rector's Signature:

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Time Log/Program / Area: 2046- Fiscal Services

Week Ending: January 15, 2011

Employee Name:		Sunday 01/09/11	Monday 01/10/11	Tuesday 01/11/11	Wednesday 01/12/11	Thursday 01/13/11	Friday 01/14/11	Saturday 01/15/11
lemi, Charles 61000 <i>Charles Lemani</i> Employee Signature	Day: In - Out		950	605			1015	545
	Lunch: Out - In		1305	1250			1205	1240
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and count.			MOSRS 7.5	SNO	VAC 0.5	CIAH 12/24	
inders, Della 61000 <i>Della Inders</i> Employee Signature	Day: In - Out					6:45	2:45	6:45
	Lunch: Out - In					1:25	1:55	1:30
	Outside Duty: From - To						2:00	1:30
	Document exceptions or comments, indicate type and count.		VAC 7.5	81C 7.5	SNO	OT 40 hrs	OT 7.5 hrs	
	Day: In - Out							
	Lunch: Out - In							
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and count.							
	Day: In - Out							
	Lunch: Out - In							
	Outside Duty: From - To							
	Document exceptions or comments, indicate type and count.							

Folk\_OIG\_PRR\_002776

## William A. Hinton State Laboratory Institute

## OVERTIME REQUEST FORM

This form is to be used to request and approve overtime, whether paid through an overtime rate or through comp time. The supervisor must anticipate and request overtime approval **prior** to the beginning of overtime work. The supervisor will keep the completed copy of the form and include it with the pay period's regular time and attendance records.

Name of Employee: Listed Below Employee #: Listed Below

Department: Drug Laboratory

Date(s) of overtime work: January 10 - January 15, 2011

# of hours requested: Listed Below

Why work cannot be completed during regular hours: Significant Backlog  
of samples

Overtime is to be:  paid at OT rate \_\_\_\_\_ added to comp time balance \_\_\_\_\_  
(if OT rate, complete below)

OT Account: 4516-1000

*Approval:*

Supervisor: C. Salem Date: 1/13/11

Department Head: \_\_\_\_\_ Date: \_\_\_\_\_

Denial reason: \_\_\_\_\_

Name	Employee ID#	Overtime earned	Name	Employee ID #	Overtime earned
Stacey Desjardins	342343	3.5	Andrea Kazakowski	297673	128
Annie Dukhan	275153	5.5	Zhi TAN	148724	7.5
Daniela Frasca	241373	5.0	Della Saunders	147387	11.5
Michael Lawler	170459	11.0			
Perke Ren	138684	30.0			